

HOUSE BILL No. 1172

DIGEST OF INTRODUCED BILL

Citations Affected: IC 16-18-2-204.5; IC 16-20-1-14; IC 16-22-8-34; IC 16-27-2; IC 16-28-11-5.5; IC 25-1-7; IC 25-2.5-3-3; IC 25-13-1; IC 25-14-1; IC 25-19-1-3; IC 25-20.5-1-1; IC 25-23-1; IC 25-23.3; IC 25-23.5-3-1.5; IC 25-23.6; IC 34-30-2-98.2.

Synopsis: Various professions and occupations. Requires a home health agency and a personal services agency to obtain an employee's limited criminal history not more than three business days after the date that an employee begins to provide services. Requires a home health agency and a personal services agency to obtain an employee's national criminal history background check if the agency discovers that the employee lived in another state at any time during the two years immediately before the date the individual was hired by the agency. Establishes criteria when a nursing home is not required to provide cardiopulmonary resuscitation or other intervention on a patient who has died. Removes the physician referral requirements to receive acupuncture. Amends the places a dental hygienist may practice under direct supervision, prescriptive supervision, and without supervision of a dentist. Establishes requirements for a dental hygienist to administer local dental anesthesia. Requires a dental assistant to work under the direct supervision of a dentist. Specifies certain procedures that may and may not be delegated to a dental assistant. Requires a person who has not been previously issued a license or permit, and who applies for a health facility administrators' license after July 1, 2008, to have an associate or higher degree. Exempts licensed mental health counselors from the licensed hypnotist requirements. Establishes the interstate nurse licensure compact. Allows the state board of nursing to issue a registered nurse's license to an applicant who completes the Canadian

(Continued next page)

Effective: Upon passage; July 1, 2008.

Welch, Brown C

January 10, 2008, read first time and referred to Committee on Public Health.



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Registered Nurse Examination. Requires part of the examination and registration fees collected by the board to be used for the rehabilitation of impaired registered nurses and impaired licensed practical nurses. Establishes the amount of fees to be deposited in the impaired nurses account. Allows an optometrist to refer patients to an occupational therapist. Establishes licensing and continuing education requirements for marriage and family therapist associates. Requires marriage and family therapists to meet certain clinical requirements and hold an associate license or be licensed in another state to receive a license. Requires addiction counselors and clinical addiction counselors to be licensed. Establishes requirements and procedures to be licensed as an addiction counselor or clinical addiction counselor. Makes conforming changes. Repeals a provision that abolishes and transfers the rights, powers, and duties of the state board of examination and registration of nurses. Repeals reference to liability for acupuncturist referrals.

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Second Regular Session 115th General Assembly (2008)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2007 Regular Session of the General Assembly.

HOUSE BILL No. 1172

A BILL FOR AN ACT to amend the Indiana Code concerning professions and occupations.

Be it enacted by the General Assembly of the State of Indiana:

1 SECTION 1. IC 16-18-2-204.5 IS ADDED TO THE INDIANA
2 CODE AS A **NEW** SECTION TO READ AS FOLLOWS
3 [EFFECTIVE UPON PASSAGE]: **Sec. 204.5. "Limited criminal**
4 **history", for purposes of IC 16-27-2, has the meaning set forth in**
5 **IC 16-27-2-2.6.**

6 SECTION 2. IC 16-20-1-14, AS AMENDED BY P.L.121-2007,
7 SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
8 JULY 1, 2008]: Sec. 14. (a) Local health officers may appoint and
9 employ public health nurses, environmental health specialists,
10 computer programmers, clerks, other personnel, and an administrator
11 of public health, subject to the confirmation of the local board of
12 health, as is necessary and reasonable to carry out and perform the
13 duties of the local health department.

14 (b) Except as provided in subsection (d), the employees of local
15 health departments shall perform any of the duties of the health officer
16 delegated by the health officer, with the approval of the local board of
17 health, on the basis of an agent-principal relation.



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(c) The public health personnel of local health departments:

- (1) must meet the minimum qualification requirements of the local board of health;
- (2) by local ordinance, become part of the county classification system for the respective public health personnel positions; and
- (3) shall perform additional duties prescribed by the rules of the state department and local board of health under the general supervision of the local health officer.

(d) If an appointee or employee of a local health officer is not a licensed water well driller under IC 25-39-3, the appointee or employee may not inspect the drilling of a water well.

~~(e) After a dentist licensed under IC 25-14 who is employed by a local health department examines a child enrolled in any grade up to and including grade 12 and prescribes a treatment plan in writing for the child; a licensed dental hygienist employed by the local health department may, without supervision by the dentist, provide the child with the following treatment in accordance with the treatment plan:~~

- ~~(1) Prophylaxis.~~
- ~~(2) Fluoride application.~~
- ~~(3) Sealants.~~

~~However, the treatment must be completed not more than ninety (90) days after the dentist prescribes the treatment plan. This subsection expires June 30, 2009.~~

SECTION 3. IC 16-22-8-34, AS AMENDED BY P.L.121-2007, SECTION 2, AS AMENDED BY P.L.194-2007, SECTION 4, AND AS AMENDED BY P.L.215-2007, SECTION 2, IS CORRECTED AND AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 34. (a) The board or corporation may do all acts necessary or reasonably incident to carrying out the purposes of this chapter, including the following:

- (1) As a municipal corporation, sue and be sued in any court with jurisdiction.
- (2) To serve as the exclusive local board of health and local department of health within the county with the powers and duties conferred by law upon local boards of health and local departments of health.
- (3) To adopt and enforce ordinances consistent with Indiana law and administrative rules for the following purposes:
 - (A) To protect property owned or managed by the corporation.
 - (B) To determine, prevent, and abate public health nuisances.
 - (C) To establish *isolation and quarantine regulations impose restrictions on persons having infectious or contagious*

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diseases and contacts of the persons, and regulate the disinfection of premises in accordance with IC 16-41-9.

(D) To license, regulate, and establish minimum sanitary standards for the operation of a business handling, producing, processing, preparing, manufacturing, packing, storing, selling, distributing, or transporting articles used for food, drink, confectionery, or condiment in the interest of the public health.

(E) To control:

(i) rodents, mosquitos, and other animals, including insects, capable of transmitting microorganisms and disease to humans and other animals; and

(ii) the animals' breeding places.

(F) To require persons to connect to available sewer systems and to regulate the disposal of domestic or sanitary sewage by private methods. However, the board and corporation have no jurisdiction over publicly owned or financed sewer systems or sanitation and disposal plants.

(G) To control rabies.

(H) For the sanitary regulation of water supplies for domestic use.

(I) To protect, promote, or improve public health. For public health activities and to enforce public health laws, the state health data center described in IC 16-19-10 shall provide health data, medical information, and epidemiological information to the corporation.

(J) To detect, report, prevent, and control disease affecting public health.

(K) To investigate and diagnose health problems and health hazards.

(L) To regulate the sanitary and structural conditions of residential and nonresidential buildings and unsafe premises.

(M) To regulate the remediation of lead hazards.

~~(M)~~ (N) To license and regulate the design, construction, and operation of public pools, spas, and beaches.

~~(N)~~ (O) To regulate the storage, containment, handling, use, and disposal of hazardous materials.

~~(O)~~ (P) To license and regulate tattoo ~~parlors~~ and body piercing facilities.

(Q) To regulate the storage and disposal of waste tires.

(4) To manage the corporation's hospitals, medical facilities, and mental health facilities.

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(5) To ~~furnish~~ provide school based health ~~and nursing~~ services.
to elementary and secondary schools within the county.

(6) To furnish medical care to ~~the indigent within~~ insured and
uninsured residents of the county. ~~unless medical care is~~
~~furnished to the indigent by the division of family resources.~~

(7) To furnish dental services to the insured and uninsured
residents of the county. ~~including the services as provided in~~
~~subsection (c) until the expiration of subsection (c).~~

~~(7)~~ (8) To ~~determine the~~ establish public health policies and
programs. ~~to be carried out and administered by the corporation.~~

~~(8)~~ (9) To adopt an annual budget ordinance and levy taxes.

~~(9)~~ (10) To incur indebtedness in the name of the corporation.

~~(10)~~ (11) To organize ~~the personnel and functions of~~ the
corporation into divisions. ~~and subdivisions to carry out the~~
~~corporation's powers and duties and to consolidate, divide, or~~
~~abolish the divisions and subdivisions.~~

~~(11)~~ (12) To acquire and dispose of property.

~~(12)~~ (13) To receive charitable contributions and gifts as provided
in 26 U.S.C. 170.

~~(13)~~ (14) To make charitable contributions and gifts.

~~(14)~~ (15) To establish a charitable foundation as provided in 26
U.S.C. 501.

~~(15)~~ (16) To receive and distribute federal, state, local, or private
grants.

~~(16)~~ (17) To receive and distribute grants from charitable
foundations.

~~(17)~~ (18) To establish ~~nonprofit~~ corporations and enter into
partnerships and joint ventures to carry out the purposes of the
corporation. ~~This subdivision does not authorize the merger of the~~
~~corporation with a hospital licensed under IC 16-21.~~

~~(18)~~ (19) To erect, improve, remodel, or repair corporation
buildings. ~~or structures or improvements to existing buildings or~~
~~structures.~~

~~(19)~~ (20) To determine ~~matters of policy regarding internal~~
~~organization and~~ operating procedures.

~~(20)~~ (21) To do the following:

(A) Adopt a schedule of reasonable charges for nonresidents
of the county for medical and mental health services.

(B) Collect the charges from the patient, ~~the patient's~~
~~insurance company, or from the governmental unit where the~~
~~patient resided at the time of the service.~~ a government
program.

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(C) Require security for the payment of the charges.

~~(21)~~ (22) To adopt a schedule of and to collect reasonable charges for *patients able to pay in full or in part: medical and mental health services.*

~~(22)~~ (23) To enforce Indiana laws, administrative rules, ordinances, and the code of the health and hospital corporation of the county.

~~(23)~~ (24) To purchase supplies, materials, and equipment. *for the corporation.*

~~(24)~~ (25) To employ personnel and establish personnel policies. *to carry out the duties, functions, and powers of the corporation.*

~~(25)~~ (26) To employ attorneys admitted to practice law in Indiana.

~~(26)~~ (27) To acquire, erect, equip, and operate the corporation's hospitals, medical facilities, and mental health facilities.

~~(27)~~ (28) To dispose of surplus property in accordance with a policy by the board.

~~(28)~~ (29) To determine the duties of officers and division directors.

~~(29)~~ (30) To fix the compensation of the officers and division directors.

~~(30)~~ (31) To carry out the purposes and object of the corporation.

~~(31)~~ (32) To obtain loans for hospital expenses in amounts and upon terms agreeable to the board. The board may secure the loans by pledging accounts receivable or other security in hospital funds.

~~(32)~~ (33) To establish fees for licenses, services, and records. The corporation may accept payment by credit card for fees. *IC 5-14-3-8(d) does not apply to fees established under this subdivision for certificates of birth, death, or stillbirth registration.*

~~(33)~~ (34) *To use levied taxes or other funds to make intergovernmental transfers to the state to fund governmental health care programs, including Medicaid and Medicaid supplemental programs.*

(b) The board shall exercise the board's powers and duties in a manner consistent with Indiana law, administrative rules, and the code of the health and hospital corporation of the county.

(c) After a dentist licensed under IC 25-14 who is employed by a local health department or the health and hospital corporation examines a child enrolled in any grade up to and including grade 12 and prescribes a treatment plan in writing for the child, a licensed dental hygienist employed by the local health department or the health

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1 *and hospital corporation may, without supervision by the dentist,*
 2 *provide the child with the following treatment in accordance with the*
 3 *treatment plan:*

4 *(1) Prophylaxis.*

5 *(2) Fluoride application.*

6 *(3) Sealants.*

7 *However, the treatment must be completed not more than ninety (90)*
 8 *days after the dentist prescribes the treatment plan. This subsection*
 9 *expires June 30, 2009.*

10 SECTION 4. IC 16-27-2-2.6 IS ADDED TO THE INDIANA CODE
 11 AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE
 12 UPON PASSAGE]: **Sec. 2.6. As used in this chapter, "limited**
 13 **criminal history" means an individual's limited criminal history**
 14 **from the Indiana central repository for criminal history**
 15 **information established under IC 10-13-3.**

16 SECTION 5. IC 16-27-2-4, AS AMENDED BY P.L.197-2007,
 17 SECTION 9, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 18 UPON PASSAGE]: **Sec. 4. (a) A person who operates a home health**
 19 **agency under IC 16-27-1 or a personal services agency under**
 20 **IC 16-27-4 shall apply, not more than three (3) business days after the**
 21 **date that an employee begins to provide services in a patient's**
 22 **temporary or permanent residence, for a determination concerning**
 23 **copy of the employee's national limited criminal history background**
 24 **check from the Indiana central repository for criminal history**
 25 **information under IC 10-13-3-39. IC 10-13-3. However, if a home**
 26 **health agency under IC 16-27-1 or a personal services agency**
 27 **under IC 16-27-4 determines an employee lived outside Indiana at**
 28 **any time during the two (2) years immediately before the date the**
 29 **individual was hired by the agency, the home health agency or**
 30 **personal services agency shall apply, not more than three (3)**
 31 **business days after the date that an employee begins to provide**
 32 **services in a patient's temporary or permanent residence, for the**
 33 **employee's national criminal history background check from the**
 34 **Indiana central repository for criminal history information under**
 35 **IC 10-13-3-39.**

36 **(b) Notwithstanding IC 10-13-3-39(b)(1), if, after hiring an**
 37 **individual, a home health agency under IC 16-27-1 or a personal**
 38 **services agency under IC 16-27-4 discovers the employee lived**
 39 **outside Indiana during the two (2) years immediately before the**
 40 **date the individual was hired, the agency shall apply, not more**
 41 **than three (3) business days after the date the agency first learns**
 42 **the employee lived outside Indiana, for the employee's national**

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1 **criminal background check from the Indiana central repository for**
 2 **criminal history information under IC 10-13-3-39.**

3 ~~(b)~~ (c) A home health agency or personal services agency may not
 4 employ a person to provide services in a patient's or client's temporary
 5 or permanent residence for more than three (3) business days without
 6 applying for a ~~determination concerning that person's~~ **that person's**
 7 **limited criminal history check or** national criminal history
 8 background check as required by ~~subsection~~ **subsections (a) and (b).**

9 SECTION 6. IC 16-27-2-5, AS AMENDED BY P.L.197-2007,
 10 SECTION 10, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 11 UPON PASSAGE]: Sec. 5. (a) Except as provided in subsection (b), a
 12 person who operates a home health agency under IC 16-27-1 or a
 13 personal services agency under IC 16-27-4 may not employ a person to
 14 provide services in a patient's or client's temporary or permanent
 15 residence if a ~~determination of~~ that person's **limited criminal history**
 16 **check or** national criminal history background check indicates that the
 17 person has been convicted of any of the following:

18 (1) Rape (IC 35-42-4-1).

19 (2) Criminal deviate conduct (IC 35-42-4-2).

20 (3) Exploitation of an endangered adult (IC 35-46-1-12).

21 (4) Failure to report battery, neglect, or exploitation of an
 22 endangered adult (IC 35-46-1-13).

23 (5) Theft (IC 35-43-4), if the conviction for theft occurred less
 24 than ten (10) years before the person's employment application
 25 date.

26 **(6) A felony that is substantially equivalent to a felony listed**
 27 **in subdivisions (1) through (2) for which the conviction was**
 28 **entered in another state.**

29 (b) A home health agency or personal services agency may not
 30 employ a person to provide services in a patient's or client's temporary
 31 or permanent residence for more than twenty-one (21) calendar days
 32 without receipt of a ~~determination of~~ that person's **limited criminal**
 33 **history or** national criminal history background check required by
 34 section 4 of this chapter, unless either the state police department or the
 35 Federal Bureau of Investigation under IC 10-13-3-39 is responsible for
 36 failing to provide the ~~determination of~~ the person's **limited criminal**
 37 **history or** national criminal history background check to the home
 38 health agency or personal services agency within the time required
 39 under this subsection.

40 SECTION 7. IC 16-28-11-5.5 IS ADDED TO THE INDIANA
 41 CODE AS A **NEW** SECTION TO READ AS FOLLOWS
 42 [EFFECTIVE JULY 1, 2008]: **Sec. 5.5. (a) This section does not**

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1 apply to the implementation of a do not resuscitate order.

2 (b) This article does not require an employee of a health facility
3 to provide cardiopulmonary resuscitation (CPR) or other
4 intervention on a patient if a licensed registered nurse who is
5 employed by the health facility has determined that the following
6 criteria have been met:

7 (1) The patient has experienced an unwitnessed cessation of
8 circulatory and respiratory functions.

9 (2) The patient is unresponsive.

10 (3) The patient's pupils are fixed and dilated.

11 (4) The patient's body temperature indicates hypothermia.

12 (5) The patient has generalized cyanosis.

13 (6) The patient has livor mortis.

14 SECTION 8. IC 25-1-7-9, AS AMENDED BY P.L.1-2007,
15 SECTION 166, IS AMENDED TO READ AS FOLLOWS
16 [EFFECTIVE JULY 1, 2008]: Sec. 9. A board member is disqualified
17 from any consideration of the case if the board member filed the
18 complaint or participated in negotiations regarding the complaint. The
19 board member is not disqualified from the board's final determination
20 solely because the board member was the hearing officer or determined
21 the complaint and the information pertaining to the complaint was
22 current significant investigative information (as defined by
23 ~~IC 25-23.2-1-5 (repealed))~~; **IC 25-23.3-2-6**).

24 SECTION 9. IC 25-1-7-10, AS AMENDED BY P.L.1-2007,
25 SECTION 167, IS AMENDED TO READ AS FOLLOWS
26 [EFFECTIVE JULY 1, 2008]: Sec. 10. (a) All complaints and
27 information pertaining to the complaints shall be held in strict
28 confidence until the attorney general files notice with the board of the
29 attorney general's intent to prosecute the licensee.

30 (b) A person in the employ of the office of attorney general or any
31 of the boards, or any person not a party to the complaint, may not
32 disclose or further a disclosure of information concerning the
33 complaint unless the disclosure is required:

34 (1) under law; or

35 (2) for the advancement of an investigation.

36 (c) **Notwithstanding subsections (a) and (b), under IC 25-23.3,**
37 **the Indiana state board of nursing may disclose to the coordinated**
38 **licensure information system (as defined in IC 25-23.3-2-5)**
39 **complaints and information concerning complaints that the board**
40 **determines to be current significant investigative information (as**
41 **defined in IC 25-23.3-2-6).**

42 SECTION 10. IC 25-2.5-3-3 IS AMENDED TO READ AS

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FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 3. (a) Subject to section 1 of this chapter, it is unlawful to practice acupuncture without a license issued under this article.

(b) Subject to subsection (c), it is unlawful for a licensed acupuncturist, other than a chiropractor licensed under IC 25-10; podiatrist licensed under IC 25-29; or dentist licensed under IC 25-14; to practice acupuncture on a patient unless the acupuncturist obtains:

(1) a written letter of referral; and

(2) either:

(A) a written diagnosis of the patient; or

(B) written documentation relating to the condition for which the patient receives acupuncture;

from an individual licensed under IC 25-22.5 within the twelve (12) months immediately preceding the date of acupuncture treatment.

(c) An acupuncturist licensed under this article may practice auricular acupuncture on a patient for the purpose of treating alcoholism; substance abuse; or chemical dependency without a written letter of referral or written diagnosis from a physician licensed under IC 25-22.5.

(d) If a licensed acupuncturist practices acupuncture on a patient after having obtained a written letter of referral or written diagnosis of the patient from a physician licensed under IC 25-22.5 as described in subsection (b), the physician is immune from civil liability relating to the patient's or acupuncturist's use of that diagnosis or referral except for acts or omissions of the physician that amount to gross negligence or willful or wanton misconduct.

SECTION 11. IC 25-13-1-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 2. As used in this article:

(a) "Dental hygienist" means one who is especially educated and trained in the science and art of maintaining the dental health of the individual or community through prophylactic or preventive measures applied to the teeth and adjacent structures.

(b) "License" means the license to practice dental hygiene issued by the state board of dentistry to dental hygienist candidates who satisfactorily pass the board's examinations.

(c) "Board" means the state board of dentistry established by IC 25-14-1.

(d) "Proprietor dentist" means a licensed dentist who is the owner and operator of the dental office in which he practices the profession of dentistry and who employs at least one (1) dentist or dental hygienist to supplement his operation and conduct of his dental office.

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(e) "Employer dentist" means a proprietor dentist who employs at least one (1) dental hygienist to supplement his dental service to his clientele.

(f) "Referral" means a recommendation that a patient seek further dental care from a licensed dentist, but not a specific dentist.

(g) "Screening" means to identify and assess the health of the hard or soft tissues of the human oral cavity.

(h) "Public health setting" means a location, including a mobile health care vehicle, where the public is invited for health care, information, and services by a program sponsored or endorsed by a governmental entity or charitable organization.

(i) "Direct supervision" means that a licensed dentist is physically present in the facility when patient care is provided.

(j) "Prescriptive supervision" means that a licensed dentist is not required to be physically present in the facility when patient care is provided, when a licensed dentist has examined the patient and has prescribed the patient care within the previous forty-five (45) days.

SECTION 12. IC 25-13-1-10, AS AMENDED BY P.L.121-2007, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 10. (a) A licensed dental hygienist may be employed to practice dental hygiene in Indiana in the following:

(1) **The A dental office or clinical setting where the dental hygienist is practicing under the direct supervision** of a legally practicing proprietor dentist.

(2) A dental school or dental hygiene school to teach and demonstrate the practice of dental hygiene.

(3) The dental clinic of any public, parochial, or private school or other institution supported by public or private funds in which the licensee is employed by the state department of health or any county or city board of health or board of education or school trustee or parochial authority or the governing body of any private school ~~However, institutional practice, other than dental hygiene instruction and dental prophylaxis for children up to and including grade 12 pupils at all times must be where the dental hygienist is practicing~~ under the **direct or prescriptive** supervision of a licensed dentist.

(4) The dental clinic of a bona fide hospital, sanitarium, or eleemosynary institution duly established and being operated under the laws of Indiana in which the licensee is employed by the directors or governing board of such hospital, sanitarium, or institution. However, such practice must be under the **direct or**

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prescriptive supervision at all times of a licensed dentist who is a staff member of the hospital or sanitarium or a member of the governing board of the institution.

(5) ~~The A:~~

(A) ~~fixed charitable dental care clinic; of an industrial or a commercial establishment in which the licensee's services are~~

(B) **public health setting; or**

(C) **correctional institution;**

that has been approved by the board and where the dental hygienist is under the direct or prescriptive supervision of a licensed dentist.

(b) A licensed dental hygienist may provide without supervision the following:

(1) Dental hygiene instruction and in-service training without restriction on location.

~~(2) Dental prophylaxis for children up to and including grade 12 if the dental hygienist is employed by any of the following:~~

~~(A) The state department of health;~~

~~(B) The department of education;~~

~~(C) The elementary or secondary school where the services are provided;~~

~~(3) (2) Screening and referrals for any person in a public health setting.~~

~~(4) Services as provided in IC 16-20-1-14 and IC 16-22-8-34.~~

SECTION 13. IC 25-13-1-10.6 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: **Sec. 10.6. A licensed dental hygienist may administer local dental anesthetics under the direct supervision of a licensed dentist if the dental hygienist has:**

(1) completed board approved educational requirements; and

(2) received a board issued hygiene anesthetic permit.

SECTION 14. IC 25-13-1-11 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: **Sec. 11. A person is deemed to be practicing dental hygiene within the meaning of this chapter who:**

(1) uses the titles "Licensed Dental Hygienist", "Dental Hygienist", or the letters "L.D.H." or "D.H." in connection with his or her name;

(2) holds himself or herself out to the public in any manner that he or she can or will render services as a dental hygienist;

(3) removes calcific deposits or accretions from the surfaces of human teeth or cleans or polishes such teeth;

(4) applies and uses within the patient's mouth such antiseptic

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sprays, washes, or medicaments for the control or prevention of dental caries as his or her employer dentist may direct;

(5) treats gum disease; ~~or~~

(6) uses impressions and x-ray photographs for treatment purposes; ~~or~~

(7) administers local dental anesthetics under section 10.6 of this chapter.

SECTION 15. IC 25-14-1-1.5, AS AMENDED BY P.L.1-2006, SECTION 430, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 1.5. As used in this article:

"Agency" refers to the Indiana professional licensing agency established by IC 25-1-5-3.

"Board" refers to the state board of dentistry established under this chapter.

"Deep sedation" means a controlled state of depressed consciousness, accompanied by partial loss of protective reflexes, including inability to respond purposefully to verbal command, produced by a pharmacologic method.

"Dental assistant" means a qualified dental office staff member, other than a licensed dental hygienist, who assists a licensed dentist while working under the dentist's direct supervision.

"Direct supervision" means that a licensed dentist is physically present in the facility when patient care is provided.

"General anesthesia" means a controlled state of unconsciousness, accompanied by partial or complete loss of protective reflexes, including inability to independently maintain an airway and respond purposefully to physical stimulation or verbal command, produced by a pharmacologic method.

"Light parenteral conscious sedation" means a minimally depressed level of consciousness under which an individual retains the ability to independently and continuously maintain an airway and respond appropriately to physical stimulation and verbal command, produced by an intravenous pharmacologic method.

SECTION 16. IC 25-14-1-23, AS AMENDED BY P.L.121-2007, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 23. (a) A person is practicing dentistry within the meaning of this chapter if the person does any of the following:

(1) Uses the word "dentist" or "dental surgeon", the letters "D.D.S." or "D.M.D.", or other letters or titles in connection with dentistry.

(2) Directs and controls the treatment of patients within a place where dental services are performed.

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(3) Advertises or permits to be advertised by sign, card, circular, handbill, newspaper, radio, or otherwise that ~~he~~ **the person** can or will attempt to perform dental operations of any kind.

(4) Offers to diagnose or professes to diagnose or treats or professes to treat any of the lesions or diseases of the human oral cavity, teeth, gums, or maxillary or mandibular structures.

(5) Extracts human teeth or corrects malpositions of the teeth or jaws.

(6) Except as provided in IC 25-13-1-10.5, administers dental anesthetics.

(7) Uses x-ray pictures for dental diagnostic purposes.

(8) Makes impressions or casts of any oral tissues or structures for the purpose of diagnosis or treatment thereof or for the construction, repair, reproduction, or duplication of any prosthetic device to alleviate or cure any oral lesion or replace any lost oral structures, tissue, or teeth.

(9) Advertises to the public by any method, except trade and professional publications, to furnish, supply, construct, reproduce, repair, or adjust any prosthetic denture, bridge, appliance, or other structure to be worn in the human mouth.

(10) Is the employer of a dentist who is hired to provide dental services.

(11) Directs or controls the use of dental equipment or dental material while the equipment or material is being used to provide dental services. However, a person may lease or provide advice or assistance concerning dental equipment or dental material if the person does not restrict or interfere with the custody, control, or use of the equipment or material by the dentist. This subdivision does not prevent a dental hygienist who is licensed under IC 25-13 from owning dental equipment or dental materials within the dental hygienist's scope of practice.

(12) Directs, controls, or interferes with a dentist's clinical judgment.

(13) Exercises direction or control over a dentist through a written contract concerning the following areas of dental practice:

(A) The selection of a patient's course of treatment.

(B) Referrals of patients, except for requiring referrals to be within a specified provider network, subject to the exceptions under IC 27-13-36-5.

(C) Content of patient records.

(D) Policies and decisions relating to refunds, if the refund payment would be reportable under federal law to the National

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Practitioner Data Bank, and warranties.

(E) The clinical content of advertising.

(F) Final decisions relating to the employment of dental office personnel.

However, this subdivision does not prohibit a person from providing advice or assistance concerning the areas of dental practice referred to in this subdivision or an insurer (as defined in IC 27-1-26-1) from carrying out the applicable provisions of IC 27 under which the insurer is licensed.

However, a person does not have to be a dentist to be a manufacturer of dental prostheses.

(b) In addition to subsection (a), a person is practicing dentistry who directly or indirectly by any means or method furnishes, supplies, constructs, reproduces, repairs, or adjusts any prosthetic denture, bridge, appliance, or any other structure to be worn in the human mouth and delivers the resulting product to any person other than the duly licensed dentist upon whose written work authorization the work was performed. A written work authorization shall include the following:

(1) The name and address of the dental laboratory to which it is directed.

(2) The case identification.

(3) A specification of the materials to be used.

(4) A description of the work to be done and, if necessary, diagrams thereof.

(5) The date of issuance of the authorization.

(6) The signature and address of the licensed dentist or other dental practitioner by whom the work authorization is issued.

A separate work authorization shall be issued for each patient of the issuing licensed dentist or other dental practitioner for whom dental technological work is to be performed.

(c) This section shall not apply to those procedures which a legally licensed and practicing dentist may delegate to ~~competent office personnel~~ **a dental assistant** as to which procedures the dentist exercises **direct** supervision and responsibility. ~~Delegated~~

(d) Procedures **delegated by a dentist** may not include ~~either: the following:~~

(1) Those procedures which require professional judgment and skill such as diagnosis, treatment planning, ~~and~~ the cutting of hard or soft tissues, or any intraoral impression which would lead to the fabrication of ~~an appliance, which, when worn by the patient, would come in direct contact with hard or soft tissues and which~~

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could result in tissue irritation or injury, or a final prosthetic appliance.

(2) ~~those~~ Except for procedures described in subsections (e) and (f), procedures delegated to a dental assistant may not include procedures allocated under IC 25-13-1 to a licensed dental hygienists. **hygienist.**

(e) This chapter shall not prevent dental students from performing dental operations under the supervision of competent instructors within the dental school or a university recognized by the board or in any public clinic under the supervision of the authorized superintendent of such clinic authorized under the authority and general direction of the board of health or school board of any city or town in Indiana.

~~(d)~~ (f) Licensed pharmacists of this state may fill prescriptions of licensed dentists of this state for any drug necessary in the practice of dentistry.

(g) Notwithstanding IC 25-13-1-11(4), a dental assistant who has completed a board approved course may apply anticariogenic medicaments under the direct supervision of a licensed dentist.

(h) Notwithstanding IC 25-13-1(3), a dental assistant who has completed a board approved course may polish the coronal surface of teeth under the direct supervision of a licensed dentist.

SECTION 17. IC 25-19-1-3 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 3. (a) The board may issue licenses to qualified persons as health facility administrators and shall establish qualification criteria for health facility administrators. The board shall adopt rules establishing standards for the competent practice of a health facility administrator. A person who applies to the board to practice as a health facility administrator must:

(1) not have been convicted of a crime that has a direct bearing on the person's ability to practice competently;

(2) if an individual has not been issued a license or permit under this chapter before July 1, 2008, have an associate, baccalaureate, or graduate degree;

~~(2)~~ (3) have:

(A) if the applicant has an associate degree in health care from an accredited institution of higher learning, satisfactorily completed a course of instruction and training prescribed by the board, which course shall be so designed as to content and so administered as to present sufficient knowledge of the needs properly to be served by health facilities, laws governing the operation of health facilities and the protection of the interests of patients therein, and the

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elements of good health facilities administration; or

(B) **if the applicant has a baccalaureate or graduate degree**, presented evidence satisfactory to the board of sufficient education, training, or experience in the foregoing fields to administer, supervise, and manage a health facility; and

(3) have passed an examination administered by the board and designed to test for competence in the subject matter referred to in subdivision (2).

(b) The board may issue a provisional license for a single period not to exceed six (6) months for the purpose of enabling a qualified individual to fill a health facility administrator position that has been unexpectedly vacated. Before an individual is issued a provisional license, the individual must fulfill the requirements in subdivision (a)(1) in addition to complying with other standards and rules established by the board.

SECTION 18. IC 25-20.5-1-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 1. This chapter does not apply to the following:

(1) A licensed dentist practicing dentistry under IC 25-14.

(2) A licensed physician practicing medicine under IC 25-22.5.

(3) A licensed osteopath practicing medicine under IC 25-22.5.

(4) A licensed psychologist practicing psychology under IC 25-33.

(5) A ~~certified~~ **licensed** social worker or clinical social worker practicing social work or clinical social work under IC 25-23.6.

(6) A registered nurse licensed under IC 25-23.

(7) A ~~certified~~ **licensed** marriage and family therapist practicing marriage and family therapy under IC 25-23.6.

(8) A licensed mental health counselor practicing mental health counseling under IC 25-23.6.

~~(8)~~ **(9)** An individual who teaches Lamaze prenatal and delivery relaxation techniques to pregnant women.

~~(9)~~ **(10)** A law enforcement officer who:

(A) is trained in hypnotism; and

(B) uses hypnosis only for law enforcement purposes.

~~(10)~~ **(11)** A licensed chiropractor practicing the science of chiropractic under IC 25-10.

~~(11)~~ **(12)** An individual who performs hypnotism exclusively for entertainment or amusement purposes at a theater, night club, or other place that offers entertainment to the public for consideration or promotional purposes.

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SECTION 19. IC 25-23-1-1.1, AS AMENDED BY P.L.1-2007,
SECTION 170, IS AMENDED TO READ AS FOLLOWS
[EFFECTIVE JULY 1, 2008]: Sec. 1.1. (a) As used in this chapter,
"registered nurse" means a person who holds a valid license issued:

(1) under this chapter; **or**

(2) **by a party state (as defined in IC 25-23.3-2-12);** and
who bears primary responsibility and accountability for nursing
practices based on specialized knowledge, judgment, and skill derived
from the principles of biological, physical, and behavioral sciences.

(b) As used in this chapter, "registered nursing" means performance
of services which include but are not limited to:

(1) assessing health conditions;

(2) deriving a nursing diagnosis;

(3) executing a nursing regimen through the selection,
performance, and management of nursing actions based on
nursing diagnoses;

(4) advocating the provision of health care services through
collaboration with or referral to other health professionals;

(5) executing regimens delegated by a physician with an
unlimited license to practice medicine or osteopathic medicine, a
licensed dentist, a licensed chiropractor, a licensed optometrist,
or a licensed podiatrist;

(6) teaching, administering, supervising, delegating, and
evaluating nursing practice;

(7) delegating tasks which assist in implementing the nursing,
medical, or dental regimen; or

(8) performing acts which are approved by the board or by the
board in collaboration with the medical licensing board of
Indiana.

(c) As used in this chapter, "assessing health conditions" means the
collection of data through means such as interviews, observation, and
inspection for the purpose of:

(1) deriving a nursing diagnosis;

(2) identifying the need for additional data collection by nursing
personnel; and

(3) identifying the need for additional data collection by other
health professionals.

(d) As used in this chapter, "nursing regimen" means preventive,
restorative, maintenance, and promotion activities which include
meeting or assisting with self-care needs, counseling, and teaching.

(e) As used in this chapter, "nursing diagnosis" means the
identification of needs which are amenable to nursing regimen.

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SECTION 20. IC 25-23-1-1.2, AS AMENDED BY P.L.1-2007, SECTION 171, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 1.2. As used in this chapter, "licensed practical nurse" means a person who holds a valid license issued under this chapter **or by a party state (as defined in IC 25-23.3-2-12)** and who functions at the direction of:

- (1) a registered nurse;
- (2) a physician with an unlimited license to practice medicine or osteopathic medicine;
- (3) a licensed dentist;
- (4) a licensed chiropractor;
- (5) a licensed optometrist; or
- (6) a licensed podiatrist;

in the performance of activities commonly performed by practical nurses and requiring special knowledge or skill.

SECTION 21. IC 25-23-1-7, AS AMENDED BY P.L.1-2007, SECTION 172, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 7. (a) The board shall do the following:

- (1) Adopt under IC 4-22-2 rules necessary to enable it to carry into effect this chapter.
- (2) Prescribe standards and approve curricula for nursing education programs preparing persons for licensure under this chapter.
- (3) Provide for surveys of such programs at such times as it considers necessary.
- (4) Accredite such programs as meet the requirements of this chapter and of the board.
- (5) Deny or withdraw accreditation from nursing education programs for failure to meet prescribed curricula or other standards.
- (6) Examine, license, and renew the license of qualified applicants.
- (7) Issue subpoenas, compel the attendance of witnesses, and administer oaths to persons giving testimony at hearings.
- (8) Cause the prosecution of all persons violating this chapter and have power to incur necessary expenses for these prosecutions.
- (9) Adopt rules under IC 4-22-2 that do the following:
 - (A) Prescribe standards for the competent practice of registered, practical, and advanced practice nursing.
 - (B) Establish with the approval of the medical licensing board created by IC 25-22.5-2-1 requirements that advanced practice

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nurses must meet to be granted authority to prescribe legend drugs and to retain that authority.

(C) Establish, with the approval of the medical licensing board created by IC 25-22.5-2-1, requirements for the renewal of a practice agreement under section 19.4 of this chapter, which shall expire on October 31 in each odd-numbered year.

(10) Keep a record of all its proceedings.

(11) Collect and distribute annually demographic information on the number and type of registered nurses and licensed practical nurses employed in Indiana.

(12) Adopt rules and administer the interstate nurse licensure compact under IC 25-23.3.

(b) The board may do the following:

(1) Create ad hoc subcommittees representing the various nursing specialties and interests of the profession of nursing. Persons appointed to a subcommittee serve for terms as determined by the board.

(2) Utilize the appropriate subcommittees so as to assist the board with its responsibilities. The assistance provided by the subcommittees may include the following:

(A) Recommendation of rules necessary to carry out the duties of the board.

(B) Recommendations concerning educational programs and requirements.

(C) Recommendations regarding examinations and licensure of applicants.

(3) Appoint nurses to serve on each of the ad hoc subcommittees.

(4) Withdraw from the interstate nurse licensure compact under IC 25-23.3.

(c) Nurses appointed under subsection (b) must:

(1) be committed to advancing and safeguarding the nursing profession as a whole; and

(2) represent nurses who practice in the field directly affected by a subcommittee's actions.

SECTION 22. IC 25-23-1-11, AS AMENDED BY P.L.1-2007, SECTION 173, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 11. (a) Any person who applies to the board for a license to practice as a registered nurse must:

(1) not have:

(A) been convicted of a crime that has a direct bearing on the person's ability to practice competently; or

(B) committed an act that would constitute a ground for a

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disciplinary sanction under IC 25-1-9;

(2) have completed:

(A) the prescribed curriculum and met the graduation requirements of a state accredited program of registered nursing that only accepts students who have a high school diploma or its equivalent as determined by the board; or

(B) the prescribed curriculum and graduation requirements of a nursing education program in a foreign country that is substantially equivalent to a board approved program as determined by the board. The board may by rule adopted under IC 4-22-2 require an applicant under this subsection to successfully complete an examination approved by the board to measure the applicant's qualifications and background in the practice of nursing and proficiency in the English language; and

(3) be physically and mentally capable of and professionally competent to safely engage in the practice of nursing as determined by the board.

The board may not require a person to have a baccalaureate degree in nursing as a prerequisite for licensure.

(b) The applicant must pass an examination in such subjects as the board may determine.

(c) The board may issue by endorsement a license to practice as a registered nurse to an applicant who has been licensed as a registered nurse, by examination, under the laws of another state if the applicant presents proof satisfactory to the board that, at the time that the applicant applies for an Indiana license by endorsement, the applicant holds a current license in another state and possesses credentials and qualifications that are substantially equivalent to requirements in Indiana for licensure by examination. The board may specify by rule what constitutes substantial equivalence under this subsection.

(d) The board may issue by endorsement a license to practice as a registered nurse to an applicant who:

(1) has completed the English version of the:

(A) Canadian Nurse Association Testing Service Examination (CNAT); or

(B) Canadian Registered Nurse Examination (CRNE);

(2) achieved the passing score required on the examination at the time the examination was taken;

(3) is currently licensed in a Canadian province or in another state; and

(4) meets the other requirements under this section.

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(e) Each applicant for examination and registration to practice as a registered nurse shall pay a fee set by the board, ~~The board may set a proctoring fee to be paid by applicants who are graduates of a state accredited school in another state; a part of which must be used for the rehabilitation of impaired registered nurses and impaired licensed practical nurses.~~ Payment of the fee or fees shall be made by the applicant prior to the date of examination. **The lesser of the following amounts from fees collected under this subsection shall be deposited in the impaired nurses account of the state general fund established by section 34 of this chapter:**

(1) Twenty-five percent (25%) of the license application fee per license applied for under this section.

(2) The cost per license to operate the impaired nurses program, as determined by the Indiana professional licensing agency.

(f) Any person who holds a license to practice as a registered nurse in:

(1) Indiana; or

(2) a party state (as defined in IC 25-23.3-2-12);

may use the title "Registered Nurse" and the abbreviation "R.N.". No other person shall practice or advertise as or assume the title of registered nurse or use the abbreviation of "R.N." or any other words, letters, signs, or figures to indicate that the person using same is a registered nurse.

SECTION 23. IC 25-23-1-12, AS AMENDED BY P.L.1-2007, SECTION 174, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 12. (a) A person who applies to the board for a license to practice as a licensed practical nurse must:

(1) not have been convicted of:

(A) an act which would constitute a ground for disciplinary sanction under IC 25-1-9; or

(B) a crime that has a direct bearing on the person's ability to practice competently;

(2) have completed:

(A) the prescribed curriculum and met the graduation requirements of a state accredited program of practical nursing that only accepts students who have a high school diploma or its equivalent, as determined by the board; or

(B) the prescribed curriculum and graduation requirements of a nursing education program in a foreign country that is substantially equivalent to a board approved program as determined by the board. The board may by rule adopted under

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IC 4-22-2 require an applicant under this subsection to successfully complete an examination approved by the board to measure the applicant's qualifications and background in the practice of nursing and proficiency in the English language; and

(3) be physically and mentally capable of, and professionally competent to, safely engage in the practice of practical nursing as determined by the board.

(b) The applicant must pass an examination in such subjects as the board may determine.

(c) The board may issue by endorsement a license to practice as a licensed practical nurse to an applicant who has been licensed as a licensed practical nurse, by examination, under the laws of another state if the applicant presents proof satisfactory to the board that, at the time of application for an Indiana license by endorsement, the applicant possesses credentials and qualifications that are substantially equivalent to requirements in Indiana for licensure by examination. The board may specify by rule what shall constitute substantial equivalence under this subsection.

(d) Each applicant for examination and registration to practice as a practical nurse shall pay a fee set by the board, ~~The board may set a proctoring fee to be paid by applicants who are graduates of a state accredited school in another state; a part of which must be used for the rehabilitation of impaired registered nurses and impaired licensed practical nurses.~~ Payment of the fees shall be made by the applicant before the date of examination. **The lesser of the following amounts from fees collected under this subsection shall be deposited in the impaired nurses account of the state general fund established by section 34 of this chapter:**

(1) Twenty-five percent (25%) of the license application fee per license applied for under this section.

(2) The cost per license to operate the impaired nurses program, as determined by the Indiana professional licensing agency.

(e) Any person who holds a license to practice as a licensed practical nurse in:

(1) Indiana; or

(2) a party state (as defined in IC 25-23.3-2-12);

may use the title "Licensed Practical Nurse" and the abbreviation "L.P.N.". No other person shall practice or advertise as or assume the title of licensed practical nurse or use the abbreviation of "L.P.N." or any other words, letters, signs, or figures to indicate that the person

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using them is a licensed practical nurse.

SECTION 24. IC 25-23-1-16.1, AS AMENDED BY P.L.1-2006, SECTION 451, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 16.1. (a) A license to practice as a registered nurse expires on October 31 in each odd-numbered year. Failure to renew the license on or before the expiration date will automatically render the license invalid without any action by the board.

(b) A license to practice as a licensed practical nurse expires on October 31 in each even-numbered year. Failure to renew the license on or before the expiration date will automatically render the license invalid without any action by the board.

(c) The procedures and fee for renewal shall be set by the board.

(d) At the time of license renewal, each registered nurse and each licensed practical nurse shall pay a renewal fee, a portion of which shall be for the rehabilitation of impaired registered nurses and impaired licensed practical nurses. The lesser of the following amounts from fees collected under this subsection shall be deposited in the impaired nurses account of the state general fund established by section 34 of this chapter:

(1) ~~Sixteen percent (16%)~~ **Twenty-five percent (25%)** of the license renewal fee per license renewed under this section.

(2) The cost per license to operate the impaired nurses program, as determined by the Indiana professional licensing agency.

SECTION 25. IC 25-23-1-27, AS AMENDED BY P.L.1-2007, SECTION 175, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 27. A person who:

(1) sells or fraudulently obtains or furnishes any nursing diploma, license or record;

(2) practices nursing under cover of any diploma or license or record illegally or fraudulently obtained or assigned or issued unlawfully or under fraudulent representation;

(3) practices nursing as a registered nurse or licensed practical nurse unless licensed to do so under this chapter **or IC 25-23.3;**

(4) uses in connection with the person's name any designation tending to imply that the person is a registered nurse or a licensed practical nurse unless licensed to practice under this chapter **or IC 25-23.3;**

(5) practices nursing during the time the person's license issued under this chapter **or IC 25-23.3** is suspended or revoked;

(6) conducts a school of nursing or a program for the training of practical nurses unless the school or program has been accredited

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by the board; or
 (7) otherwise violates this chapter;
 commits a Class B misdemeanor.

SECTION 26. IC 25-23-1-34, AS AMENDED BY P.L.1-2007, SECTION 176, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 34. (a) The impaired nurses account is established within the state general fund for the purpose of providing money for providing rehabilitation of impaired registered nurses or licensed practical nurses under this article. The account shall be administered by the Indiana professional licensing agency.

(b) Expenses of administering the account shall be paid from money in the account. The account consists of the following:

(1) Funds collected for the rehabilitation of impaired registered nurses and impaired licensed practical nurses under ~~section~~ **sections 11(e), 12(d), and 16.1(d)** of this chapter.

(2) Funds collected under section 31(c)(2) of this chapter.

~~(3) Funds collected for the rehabilitation of impaired registered nurses and impaired licensed practical nurses under IC 25-23.2-3-5 (repeated).~~

~~(4)~~ **(3)** Fines collected from registered nurses or licensed practical nurses under IC 25-1-9-9(a)(6).

(c) The treasurer of state shall invest the money in the account not currently needed to meet the obligations of the account in the same manner as other public money may be invested.

(d) Money in the account is appropriated to the board for the purpose stated in subsection (a).

SECTION 27. IC 25-23.3 IS ADDED TO THE INDIANA CODE AS A **NEW ARTICLE** TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]:

ARTICLE 23.3. INTERSTATE NURSE LICENSURE COMPACT

Chapter 1. Purpose

Sec. 1. It is the purpose of this compact to allow qualified nurses who are licensed in a compact state to practice nursing in another compact state and to reduce redundant licensing requirements of nurses who practice in multiple states.

Chapter 2. Definitions

Sec. 1. The definitions in this chapter apply throughout this article.

Sec. 2. "Adverse action" means a home or remote state action.

Sec. 3. "Alternative program" means a voluntary, nondisciplinary monitoring program approved by a nurse licensing

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1 board.

2 Sec. 4. "Board" has the meaning set forth in IC 25-23-1-1.

3 Sec. 5. "Coordinated licensure information system" means an
4 integrated process:

5 (1) for collecting, storing, and sharing information on nurse
6 licensure and enforcement activities related to nurse licensure
7 laws; and

8 (2) administered by a nonprofit organization composed of and
9 controlled by state nurse licensing boards.

10 Sec. 6. "Current significant investigative information" means:

11 (1) investigative information that a licensing board, after a
12 preliminary inquiry that includes notification and an
13 opportunity for the nurse to respond if required by state law,
14 has reason to believe is not groundless and, if proved true,
15 would indicate more than a minor infraction; or

16 (2) investigative information that indicates that the nurse
17 represents an immediate threat to public health and safety
18 regardless of whether the nurse has been notified and has had
19 an opportunity to respond.

20 Sec. 7. "Home state" means the party state that is a nurse's
21 primary state of residence.

22 Sec. 8. "Home state action" means any administrative, civil,
23 equitable, or criminal action permitted by the home state's laws
24 that are imposed on a nurse by the home state's licensing board or
25 other authority, including an action against an individual's license,
26 such as revocation, suspension, probation, or any other action that
27 affects a nurse's authorization to practice.

28 Sec. 9. "Licensing board" means a party state's regulatory body
29 responsible for issuing nurse licenses.

30 Sec. 10. "Multistate licensure privilege" means current, official
31 authority from a remote state permitting the practice of nursing as
32 either a registered nurse or a licensed practical/vocational nurse in
33 that party state. All party states have the authority, in accordance
34 with state due process law, to take actions against a nurse's
35 privilege, such as revocation, suspension, probation, or any other
36 action that affects a nurse's authorization to practice.

37 Sec. 11. "Nurse" means a registered nurse or licensed
38 practical/vocational nurse as defined by the state practice laws of
39 each party state.

40 Sec. 12. "Party state" means any state that has adopted this
41 compact.

42 Sec. 13. "Remote state" means a party state, other than the

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home state:

(1) where a patient is located at the time nursing care is provided; or

(2) in the case of the practice of nursing not involving a patient, in a party state where the recipient of nursing practice is located.

Sec. 14. "Remote state action" means:

(1) any administrative, civil, equitable, or criminal action permitted by a remote state's laws that are imposed on a nurse by the remote state's licensing board or other authority, including actions against an individual's multistate licensure privilege to practice in the remote state; and

(2) cease and desist and other injunctive or equitable orders issued by remote states or the licensing boards of remote states.

Sec. 15. "State" means a state, territory, or possession of the United States, the District of Columbia, or the Commonwealth of Puerto Rico.

Sec. 16. "State practice laws" means the individual party state's laws and rules that govern the practice of nursing, define the scope of nursing practice, and create the methods and grounds for imposing discipline. The term does not include the initial qualifications for licensure or requirements necessary to obtain and retain a license, except for qualifications or requirements of the home state.

Chapter 3. General Provisions and Jurisdiction

Sec. 1. A license to practice registered nursing issued by a home state to a resident in that state shall be recognized by each party state as authorizing a multistate licensure privilege to practice as a registered nurse in the party state. A license to practice licensed practical/vocational nursing issued by a home state to a resident in that state shall be recognized by each party state as authorizing a multistate licensure privilege to practice as a licensed practical/vocational nurse in the party state. To obtain or retain a license, an applicant must meet the home state's qualifications for licensure and license renewal and all other applicable state laws.

Sec. 2. A party state may, in accordance with state due process laws, limit or revoke the multistate licensure privilege of any nurse to practice in the state and may take any other actions under applicable state laws necessary to protect the health and safety of the state's citizens. If a party state takes such an action, it shall promptly notify the administrator of the coordinated licensure

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information system. The administrator of the coordinated licensure information system shall promptly notify the home state of any such actions by remote states.

Sec. 3. A nurse practicing in a party state must comply with the state practice laws of the state in which a patient is located at the time care is rendered. In addition, the practice of nursing is not limited to patient care, but includes all nursing practice as defined by the state practice laws of a party state. The practice of nursing subjects a nurse to the jurisdiction of the nurse licensing board, the courts, and the laws in that party state.

Sec. 4. This compact does not affect additional requirements imposed by states for advanced practice registered nursing. However, a multistate licensure privilege to practice registered nursing granted by a party state shall be recognized by other party states as a license to practice registered nursing if a license is required by state law as a precondition for qualifying for advanced practice registered nurse authorization.

Sec. 5. Individuals not residing in a party state continue to be able to apply for nurse licensure as provided under the laws of each party state. However, the license granted to these individuals is not recognized as granting the privilege to practice nursing in any other party state unless explicitly agreed to by that party state.

Chapter 4. Applications for Licensure in a Party State

Sec. 1. Upon application for a license, the licensing board in a party state shall ascertain, through the coordinated licensure information system, whether the applicant has ever held, or is the holder of, a license issued by any other party state, whether there are any restrictions on the multistate licensure privilege, and whether any other adverse action by any state has been taken against the license.

Sec. 2. A nurse in a party state may hold licensure in only one (1) party state at a time, issued by the home state.

Sec. 3. A nurse who intends to change primary state of residence may apply for licensure in the new home state before the change. However, a new license may not be issued by a party state until a nurse provides evidence of change in primary state of residence satisfactory to the new home state's licensing board.

Sec. 4. (a) If a nurse:

- (1) changes primary state of residence by moving between two
 - (2) party states; and
 - (2) obtains a license from the new home state;
- the license from the former home state is no longer valid.

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1 (b) If a nurse:

2 (1) changes primary state of residence by moving from a
3 nonparty state to a party state; and

4 (2) obtains a license from the new home state;

5 the individual state license issued by the nonparty state is not
6 affected and remains in force if provided by the laws of the
7 nonparty state.

8 (c) If a nurse changes primary state of residence by moving
9 from a party state to a nonparty state, the license issued by the
10 prior home state converts to an individual state license, valid only
11 in the former home state, without multistate license privilege to
12 practice in other party states.

13 Chapter 5. Adverse Actions

14 Sec. 1. The licensing board of a remote state shall promptly
15 report to the administrator of the coordinated licensure
16 information system any remote state actions, including the factual
17 and legal basis for such actions, if known. The licensing board of a
18 remote state shall promptly report any current significant
19 investigative information yet to result in a remote state action. The
20 administrator of the coordinated licensure information system
21 shall promptly notify the home state of any such reports.

22 Sec. 2. The licensing board of a party state has authority to
23 complete any pending investigation for a nurse who changes
24 primary state of residence during the course of the investigation.
25 The licensing board also has authority to take appropriate action
26 and shall promptly report the conclusions of such investigations to
27 the administrator of the coordinated licensure information system.
28 The administrator of the coordinated licensure information system
29 shall promptly notify the new home state of any such actions.

30 Sec. 3. A remote state may take adverse action affecting the
31 multistate licensure privilege to practice within the remote state.
32 However, only the home state has authority to impose adverse
33 action against the license issued by the home state.

34 Sec. 4. For purposes of imposing adverse action, the licensing
35 board of the home state shall give the same priority and effect to
36 reported conduct received from a remote state as it would if such
37 conduct had occurred within the home state. In so doing, it shall
38 apply its own state laws to determine appropriate action.

39 Sec. 5. The home state may take adverse action based on the
40 factual findings of a remote state, so long as each state follows its
41 own procedures for imposing such adverse action.

42 Sec. 6. This compact does not override a party state's decision

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that participation in an alternative program may be used instead of licensure action and that such participation shall remain nonpublic if required by the party state's laws. Party states must require nurses who enter any alternative programs to agree not to practice in any other party state during the term of the alternative program without prior authorization from the other party state.

Chapter 6. Additional Authority Invested in Party State Nurse Licensing Boards

Sec. 1. Notwithstanding any other powers, a party state nurse licensing board may do the following:

(1) If otherwise permitted by state law, recover from a nurse the costs of investigations and disposition of cases resulting from any adverse action taken against the nurse.

(2) Issue subpoenas for both hearings and investigations that require the attendance and testimony of witnesses and the production of evidence. Subpoenas issued by a nurse licensing board in a party state for the attendance and testimony of witnesses and the production of evidence from another party state shall be enforced in the latter state by a court with jurisdiction, according to the practice and procedure of that court applicable to subpoenas issued in proceedings pending before it. The issuing authority shall pay any witness fees, travel expenses, mileage, and other fees required by the service statutes of the state where the witnesses and evidence are located.

(3) Issue cease and desist orders to limit or revoke a nurse's authority to practice in the state.

(4) Adopt uniform rules as provided for in IC 25-23.3-8-3.

Chapter 7. Coordinated Licensure Information System

Sec. 1. All party states shall participate in a cooperative effort to create a coordinated data base of all licensed registered nurses and licensed practical/vocational nurses. This system must include information on the licensure and disciplinary history of each nurse, as contributed by party states, to assist in the coordination of nurse licensure and enforcement efforts.

Sec. 2. Notwithstanding any other law, all party states' licensing boards shall promptly report adverse actions, actions against multistate licensure privileges, any current significant investigative information yet to result in adverse action, denials of applications, and the reasons for such denials to the coordinated licensure information system.

Sec. 3. Current significant investigative information shall be

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transmitted through the coordinated licensure information system only to party state licensing boards.

Sec. 4. Notwithstanding any other law, all party states' licensing boards contributing information to the coordinated licensure information system may designate information that may not be shared with nonparty states or disclosed to other entities or individuals without the express permission of the contributing state.

Sec. 5. Any personally identifiable information obtained by a party state's licensing board from the coordinated licensure information system may not be shared with nonparty states or disclosed to other entities or individuals except to the extent permitted by the laws of the party state contributing the information.

Sec. 6. Any information contributed to the coordinated licensure information system that is subsequently required to be expunged by the laws of the party state contributing that information shall also be expunged from the coordinated licensure information system.

Sec. 7. The compact administrators, acting jointly and in consultation with the administrator of the coordinated licensure information system, shall formulate necessary and proper procedures for the identification, collection, and exchange of information under this compact.

Chapter 8. Compact Administration and Interchange of Information

Sec. 1. The head of the nurse licensing board of each party state, or that person's designee, shall be the administrator of this compact for that person's state. For purposes of this article, the executive director of the Indiana professional licensing agency or the executive director's designee shall be the administrator of this compact.

Sec. 2. The compact administrator of each party state shall furnish to the compact administrator of each other party state any information and documents, including, but not limited to, a uniform data set of investigations, identifying information, licensure data, and disclosable alternative program participation information, to facilitate the administration of this compact.

Sec. 3. Compact administrators may develop uniform rules to facilitate and coordinate implementation of this compact. These uniform rules shall be adopted by a board under IC 25-23.3-6-1.

Chapter 9. Immunity

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1 **Sec. 1. Neither a party state nor an officer, employee, or agent**
 2 **of a party state's nurse licensing board who acts in accordance**
 3 **with this compact is liable on account of any act or omission in**
 4 **good faith while engaged in the performance of duties under this**
 5 **compact. Good faith in this article does not include willful**
 6 **misconduct, gross negligence, or recklessness.**

7 **Chapter 10. Entry Into Force, Withdrawal, and Amendment**

8 **Sec. 1. This compact becomes effective as to any state when it**
 9 **has been enacted into the laws of that state. Any party state may**
 10 **withdraw from this compact.**

11 **Sec. 2. No withdrawal affects the validity or applicability by the**
 12 **licensing boards of states remaining party to the compact of any**
 13 **report of adverse action occurring before the withdrawal.**

14 **Sec. 3. This compact shall not be construed to invalidate or**
 15 **prevent any nurse licensure agreement or other cooperative**
 16 **arrangement between a party state and a nonparty state that is**
 17 **made in accordance with this compact.**

18 **Sec. 4. This compact may be amended by the party states. No**
 19 **amendment to this compact becomes effective and binding upon**
 20 **the party states unless and until it is enacted into the laws of all**
 21 **party states.**

22 **Chapter 11. Construction and Severability**

23 **Sec. 1. This compact shall be liberally construed to effectuate its**
 24 **purposes. The provisions of this compact are severable and if any**
 25 **phrase, clause, sentence, or provision of this compact is declared to**
 26 **be contrary to the constitution of any party state or of the United**
 27 **States or if the applicability of this compact to any government,**
 28 **agency, person, or circumstance is held invalid, the validity of the**
 29 **remainder of this compact and the applicability of this compact to**
 30 **any government, agency, person, or circumstance is not affected**
 31 **thereby. If this compact is held contrary to the constitution of any**
 32 **party state, this compact remains in full force and effect as to the**
 33 **remaining party states and in full force and effect as to the party**
 34 **state affected as to a severable matter.**

35 **Sec. 2. If party states find a need for settling disputes arising**
 36 **under this compact:**

37 **(1) the party states may submit the issues in dispute to an**
 38 **arbitration panel comprised of an individual appointed by the**
 39 **compact administrator in the home state, an individual**
 40 **appointed by the compact administrator in each remote state**
 41 **involved, and an individual mutually agreed upon by the**
 42 **compact administrators of all the party states involved in the**

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dispute; and

(2) the decision of a majority of the arbitrators is final and binding.

Sec. 3. This article expires July 1, 2012.

SECTION 28. IC 25-23.5-3-1.5, AS ADDED BY P.L.197-2007, SECTION 66, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 1.5. (a) Except as provided in subsection (b), an occupational therapist may not provide occupational therapy services to a person until the person has been referred to the occupational therapist by **one (1) of the following:**

(1) A physician licensed under IC 25-22.5.

(2) A podiatrist licensed under IC 25-29.

(3) An advanced practice nurse licensed under IC 25-23.

(4) A psychologist licensed under IC 25-33. ~~or~~

(5) A chiropractor licensed under IC 25-10.

(6) An optometrist licensed under IC 25-24.

(b) An occupational therapist may provide the following services without a referral from a physician licensed under IC 25-22.5, a podiatrist licensed under IC 25-29, an advanced practice nurse licensed under IC 25-23, a psychologist licensed under IC 25-33, ~~or~~ a chiropractor licensed under IC 25-10, **or an optometrist licensed under IC 25-24:**

(1) Ergonomic or home assessment.

(2) Injury or illness prevention education and wellness services.

(3) Occupational therapy activities provided in an educational setting.

(4) Occupational therapy activities that the board determines, after reviewing the recommendations of the committee, are appropriate to be conducted in a community based environment.

SECTION 29. IC 25-23.6-1-1.3 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: **Sec. 1.3. "Addiction counseling experience" means a time during which an applicant provides clinical services, including evaluation and treatment of clients, where at least fifty percent (50%) of the time consists of providing counseling services directly to clients diagnosed with a substance use disorder.**

SECTION 30. IC 25-23.6-1-3.8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 3.8. Except as provided in IC 25-23.6-7-5, ~~as used in this chapter,~~ "counselor" refers to a social worker, a clinical social worker, a marriage and family therapist, ~~or~~ a mental health counselor, **an addiction counselor, or a clinical**

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addiction counselor who is licensed under this article.

SECTION 31. IC 25-23.6-1-4.3 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: **Sec. 4.3. "Licensed addiction counselor" means an individual who:**

- (1) is licensed under this article; and
- (2) has a baccalaureate or higher degree in addiction or another human services related field from an eligible postsecondary educational institution.

SECTION 32. IC 25-23.6-1-4.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: **Sec. 4.5. "Licensed clinical addiction counselor" means an individual who:**

- (1) is licensed under this article; and
- (2) has a master's or higher degree in addiction or another human services related field from an eligible postsecondary educational institution.

SECTION 33. IC 25-23.6-1-5.7 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: **Sec. 5.7. (a) "Practice of addiction counseling" means professional services delivered by a licensed addiction counselor, designed to effect change in addictive behavior and involving specialized knowledge and skill related to addictions and addictive behaviors, including understanding addiction, knowledge of the treatment process, application to practice, and professional readiness. The term includes:**

- (1) gathering information through structured interview screens through routine protocols;
- (2) reviewing assessment findings to develop a plan for addiction treatment and to coordinate services;
- (3) providing client and family education related to addictions;
- (4) providing information on social networks and community systems for referrals and discharge planning;
- (5) participating in multidisciplinary treatment team meetings or consulting with clinical addiction professionals; and
- (6) maintaining the highest level of professionalism and ethical responsibility.

(b) The term does not include the use of psychotherapy or diagnosis (as defined in IC 25-22.5-1-1.1(c)).

SECTION 34. IC 25-23.6-1-5.9 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS

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[EFFECTIVE JULY 1, 2008]: **Sec. 5.9. (a) "Practice of clinical addiction counseling" means professional services delivered by a licensed clinical addiction counselor designed to effect change in addictive behavior and involving specialized knowledge and skill related to addictions and addictive behaviors, including understanding addiction, knowledge of the treatment process, application to practice, and professional readiness. The term includes:**

- (1) gathering information through structured interview screens through routine protocols and standardized clinical instruments;**
- (2) providing psychosocial evaluations using accepted classifications, including classifications from the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders, as amended and supplemented, but only to the extent of the clinical addiction counselor's education, training, experience, and scope of practice as established by this article;**
- (3) reviewing assessment findings to develop a plan for addiction treatment and to coordinate services;**
- (4) using counseling and psychotherapeutic techniques through individual, group, and family counseling to treat addiction and other substance related problems and conditions in a variety of settings, including mental and physical health facilities, child and family service agencies, and private practice;**
- (5) providing client and family education related to addictions;**
- (6) providing information on social networks and community systems for referrals and discharge planning;**
- (7) participating in multidisciplinary treatment team meetings, or consulting with clinical addiction professionals; and**
- (8) maintaining the highest level of professionalism and ethical responsibility.**

(b) The term does not include diagnosis (as defined in IC 25-22.5-1-1.1(c)).

SECTION 35. IC 25-23.6-2-2, AS AMENDED BY P.L.2-2007, SECTION 329, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: **Sec. 2. (a) The board consists of ~~nine (9)~~ eleven (11) members appointed by the governor for terms of three (3) years. The board must include the following:**

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- (1) Two (2) marriage and family therapists who:
 - (A) have at least a master's degree in marriage and family therapy or a related field from an eligible postsecondary educational institution;
 - (B) are licensed under this chapter; and
 - (C) have five (5) years of experience in marriage and family therapy.
- (2) One (1) social worker who:
 - (A) has at least a master's degree in social work from an eligible postsecondary educational institution accredited by the Council on Social Work Education;
 - (B) is licensed under this article; and
 - (C) has at least five (5) years of experience as a social worker.
- (3) One (1) social services director of a hospital with a social work degree who has at least three (3) years of experience in a hospital setting.
- (4) Two (2) mental health counselors who:
 - (A) have at least a master's degree in mental health counseling;
 - (B) are licensed under this article; and
 - (C) have at least five (5) years experience as a mental health counselor.
- (5) Two (2) consumers who have never been credentialed under this article.
- (6) One (1) physician licensed under IC 25-22.5 who has training in psychiatric medicine.
- (7) Two (2) licensed clinical addiction counselors who:**
 - (A) are licensed under this article; and**
 - (B) have five (5) years of experience in clinical addiction counseling.**

(b) Not more than ~~five (5)~~ **six (6)** members of the board may be from the same political party.

SECTION 36. IC 25-23.6-2-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 8. (a) The board shall adopt rules under IC 4-22-2 establishing standards for the following:

- (1) The competent practice of marriage and family therapy, social work, clinical social work, ~~and~~ mental health counseling, **addiction counseling, and clinical addiction counseling.**
- (2) The renewal of licenses issued under this article.
- (3) Standards for the administration of this article.
- (4) Continuing education requirements for an individual seeking renewal of licensure as a social worker, clinical social worker, or marriage and family therapist.

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- (5) The retention of patient records and reports by a counselor.
- (6) The approval of continuing education providers, programs, courses, fees, and proof of course completion.
- (b) The board shall establish fees under IC 25-1-8-2.
- (c) The board shall do the following:
 - (1) Consider the qualifications of individuals who apply for a license under this article.
 - (2) Provide for examinations required under this article.
 - (3) Subject to IC 25-1-8-6, renew licenses under this article.
 - (4) Conduct proceedings under IC 25-1-9.

SECTION 37. IC 25-23.6-2-9.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: **Sec. 9.5. (a) The addiction counselor section of the board is established. The section consists of the following:**

- (1) Two (2) licensed clinical addiction counselor members of the board.**
- (2) Two (2) consumer members of the board.**
- (3) One (1) physician member of the board.**
- (b) Three (3) members of the clinical addiction counselors section, two (2) of whom must be licensed clinical addiction counselors, constitute a quorum.**

SECTION 38. IC 25-23.6-2-11 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 11. The social worker, marriage and family therapist, ~~and~~ mental health counselor, **and addiction counselor** sections of the board shall do the following:

- (1) Approve continuing education courses authorized under this article.
- (2) Propose rules to the board concerning the practice of the profession regulated by each section.
- (3) Other duties as directed by the board.

SECTION 39. IC 25-23.6-3-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 1. **(a)** An individual may not:

- (1) profess to be a licensed marriage and family therapist;
- (2) use the title:
 - (A) "licensed marriage and family therapist";
 - (B) "marriage and family therapist"; or
 - (C) "family therapist";
- (3) use any other words, letters, abbreviations, or insignia indicating or implying that the individual is a licensed marriage and family therapist; or

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(4) practice marriage and family therapy for compensation; unless the individual is licensed under ~~this article~~, IC 25-22.5, **IC 25-23.6-8-1**, or IC 25-33.

(b) An individual may not:

(1) profess to be a licensed marriage and family therapist associate;

(2) use the title:

(A) "licensed marriage and family therapist associate";

(B) "marriage and family therapist associate"; or

(C) "family therapist associate";

(3) use any other words, letters, abbreviations, or insignia indicating or implying that the individual is a licensed marriage and family therapist associate; or

(4) practice marriage and family therapy for compensation; unless the individual is licensed under IC 25-22.5, IC 25-23.6-8-1.5, or IC 25-33.

SECTION 40. IC 25-23.6-3-4 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 4. **(a)** An individual who is licensed as a marriage and family therapist **under IC 25-23.6-8-1** shall:

(1) display the license or a clear copy of the license at each location where the marriage and family therapist regularly practices; and

(2) include the words "licensed marriage and family therapist" or the letters "LMFT" on all promotional materials, including business cards, brochures, stationery, advertisements, and signs that name the individual.

(b) An individual who is licensed as a marriage and family therapist associate under IC 25-23.6-8-1.5 shall:

(1) display the license or a clear copy of the license at each location where the marriage and family therapist associate regularly practices; and

(2) include the words "licensed marriage and family therapist associate" or the letters "LMFTA" on all promotional materials, including business cards, brochures, stationery, advertisements, and signs that name the individual.

SECTION 41. IC 25-23.6-4-2, AS AMENDED BY P.L.2-2007, SECTION 331, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 2. **(a)** This article may not be construed to limit the social work or clinical social work services performed by a person who does not use a title specified in this article and who is one (1) of the following:

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(1) A licensed or certified health care professional acting within the scope of the person's license or certificate.

(2) A student, an intern, or a trainee pursuing a course of study in medicine, psychology, or a course of study to gain licensure under this article in an accredited eligible postsecondary educational institution or training institution accredited by the Council on Social Work Education, or a graduate accumulating experience required for licensure if:

(A) the services are performed under qualified supervision and constitute a part of the person's supervised course of study or other level of supervision; and

(B) the student or graduate uses a title that contains the term "intern", "student", or "trainee".

(3) Not a resident of Indiana if the person performed social work in Indiana for not more than five (5) days in any one (1) month or more than fifteen (15) days in any one (1) calendar year and the person is authorized to perform such services under the laws of the state or country in which the person resides.

(4) A rabbi, priest, Christian Science practitioner, minister, or other member of the clergy.

(5) An employee or a volunteer for an organization performing charitable, religious, or educational functions, providing pastoral counseling, or other assistance.

(6) A person who provides school counseling. ~~or a person who is certified by a state or national organization that is recognized by the Indiana division of mental health and addiction and who provides counseling in the areas of alcohol or drug abuse addictions.~~

(7) A governmental employee who remains in the same job classification or job family of that job classification.

(b) Nothing in this section prohibits a person referred to in subsection (a) from qualifying for licensure under this article.

SECTION 42. IC 25-23.6-8-1, AS AMENDED BY P.L.2-2007, SECTION 337, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 1. An individual who applies for a license as a marriage and family therapist must meet the following requirements:

(1) Furnish satisfactory evidence to the board that the individual has:

(A) received a master's or doctor's degree in marriage and family therapy, or in a related area as determined by the board from an eligible postsecondary educational institution that

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meets the requirements under section 2.1(a)(1) of this chapter or from a foreign school that has a program of study that meets the requirements under section 2.1(a)(2) or (2.1)(a)(3) of this chapter; and

(B) completed the educational requirements under section 2.5 of this chapter.

(2) Furnish satisfactory evidence to the board that the individual has met the clinical experience requirements under section 2.7 of this chapter.

(3) Furnish satisfactory evidence to the board that the individual:

(A) holds a marriage and family therapist associate license, in good standing, issued under section 5 of this chapter; or

(B) is licensed or certified to practice as a marriage and family therapist in another state and is otherwise qualified under this chapter.

~~(2)~~ **(4) Furnish satisfactory evidence to the board that the individual does not have a conviction for a crime that has a direct bearing on the individual's ability to practice competently.**

~~(3)~~ **(5) Furnish satisfactory evidence to the board that the individual has not been the subject of a disciplinary action by a licensing or certification agency of another state or jurisdiction on the grounds that the individual was not able to practice as a marriage and family therapist without endangering the public.**

~~(4)~~ **Pass an examination provided by the board.**

~~(5)~~ **(6) Pay the fee established by the board.**

SECTION 43. IC 25-23.6-8-1.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: **Sec. 1.5. An individual who applies for a license as a marriage and family therapist associate must meet the following requirements:**

(1) Furnish satisfactory evidence to the board that the individual has:

(A) received a master's or doctor's degree in marriage and family therapy, or in a related area as determined by the board from an institution of higher education that meets the requirements under section 2.1(a)(1) of this chapter or from a foreign school that has a program of study that meets the requirements under section 2.1(a)(2) or 2.1(a)(3) of this chapter; and

(B) completed the educational requirements under section 2.5 of this chapter.

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(2) Furnish satisfactory evidence to the board that the individual does not have a conviction for a crime that has a direct bearing on the individual's ability to practice competently.

(3) Furnish satisfactory evidence to the board that the individual has not been the subject of a disciplinary action by a licensing or certification agency of another state or jurisdiction on the grounds that the individual was not able to practice as a marriage and family therapist without endangering the public.

(4) Pay the fee established by the board.

(5) Pass an examination provided by the board.

SECTION 44. IC 25-23.6-8-2.1, AS AMENDED BY P.L.2-2007, SECTION 338, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 2.1. (a) An applicant **for a license as a marriage and family therapist** under section 1 of this chapter or **an applicant for a license as a marriage and family therapist associate under section 1.5 of this chapter** must have received a master's or doctor's degree in marriage and family therapy, or in a related area as determined by the board, from an eligible postsecondary educational institution that meets the following requirements:

(1) If the institution was located in the United States or a territory of the United States, at the time of the applicant's graduation the institution was accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation.

(2) If the institution was located in Canada, at the time of the applicant's graduation the institution was a member in good standing with the Association of Universities and Colleges of Canada.

(3) If the institution was located in a foreign country other than Canada, at the time of the applicant's graduation the institution:

(A) was recognized by the government of the country where the school was located as a program to train in the practice of marriage and family therapy or psychotherapy; and

(B) maintained a standard of training substantially equivalent to the standards of institutions accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation.

(b) An applicant **for a license as a marriage and family therapist** under section 1 of this chapter or **an applicant for a license as a marriage and family therapist associate under section 1.5 of this**

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chapter who has a master's or doctoral degree from a program that did not emphasize marriage and family therapy may complete the course work requirement from an institution that is:

- (1) accredited by the Commission on Accreditation for Marriage and Family Therapy Education; and
- (2) recognized by the United States Department of Education.

SECTION 45. IC 25-23.6-8-2.5, AS AMENDED BY P.L.2-2007, SECTION 339, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 2.5. (a) An applicant **for a license as a marriage and family therapist** under section 1 of this chapter **or an applicant for a license as a marriage and family therapist associate under section 1.5 of this chapter** must complete the following educational requirements:

- (1) Except as provided in subsection (b), complete twenty-seven (27) semester hours or forty-one (41) quarter hours of graduate course work that must include graduate level course credits with material in at least the following content areas:
 - (A) Theoretical foundations of marriage and family therapy.
 - (B) Major models of marriage and family therapy.
 - (C) Individual development.
 - (D) Family development and family relationships.
 - (E) Clinical problems.
 - (F) Collaboration with other disciplines.
 - (G) Sexuality.
 - (H) Gender and sexual orientation.
 - (I) Issues of ethnicity, race, socioeconomic status, and culture.
 - (J) Therapy techniques.
 - (K) Behavioral research that focuses on the interpretation and application of research data as it applies to clinical practice.

The content areas may be combined into any one (1) graduate level course, if the applicant can prove that the course work was devoted to each content area.

- (2) Not less than one (1) graduate level course of two (2) semester hours or three (3) quarter hours in the following areas:

- (A) Legal, ethical, and professional standards issues in the practice of marriage and family therapy or an equivalent course approved by the board.
- (B) Appraisal and assessment for individual or interpersonal disorder or dysfunction.
- (3) At least one (1) supervised clinical practicum, internship, or field experience in a marriage and family counseling setting that meets the following requirements:

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(A) The applicant provided five hundred (500) face to face client contact hours of marriage and family therapy services under the supervision of a licensed marriage and family therapist who has at least five (5) years of experience or a qualified supervisor approved by the board.

(B) The applicant received one hundred (100) hours of supervision from a licensed marriage and family therapist who has at least five (5) years experience as a qualified supervisor.

The requirements under subdivisions (A) and (B) may be met by a supervised practice experience that took place away from an institution of higher education but that is certified by an official of the eligible postsecondary educational institution as being equivalent to a graduate level practicum or internship program at an institution accredited by an accrediting agency approved by the United States Department of Education Commission on Recognition of Postsecondary Education, the Association of Universities and Colleges of Canada, or the Commission on Accreditation for Marriage and Family Therapy Education.

(b) The following graduate work may not be used to satisfy the content area requirements under subsection (a):

(1) Thesis or dissertation work.

(2) Practicums, internships, or fieldwork.

SECTION 46. IC 25-23.6-8-2.7, AS AMENDED BY P.L.197-2007, SECTION 85, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 2.7. (a) An applicant **for a license as a marriage and family therapist** under section 1 of this chapter must have at least two (2) years of clinical experience, during which at least fifty percent (50%) of the applicant's clients were receiving marriage and family therapy services. The applicant's clinical experience must include one thousand (1,000) hours of post degree clinical experience and two hundred (200) hours of post degree clinical supervision, of which one hundred (100) hours must be individual supervision, under the supervision of a licensed marriage and family therapist who has at least five (5) years of experience or an equivalent supervisor, as determined by the board.

(b) ~~Within the two (2) years~~ **When obtaining the clinical experience** required under subsection (a), the applicant must provide direct individual, group, and family therapy and counseling to the following categories of cases:

(1) Unmarried couples.

(2) Married couples.

(3) Separating or divorcing couples.

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(4) Family groups, including children.

(c) A doctoral internship may be applied toward the supervised work experience requirement.

(d) Except as provided in subsection (e), the experience requirement may be met by work performed at or away from the premises of the supervising marriage and family therapist.

(e) The work requirement may not be performed away from the supervising marriage and family therapist's premises if:

(1) the work is the independent private practice of marriage and family therapy; and

(2) the work is not performed at a place that has the supervision of a licensed marriage and family therapist or an equivalent supervisor, as determined by the board.

SECTION 47. IC 25-23.6-8-3 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 3. An individual who satisfies the requirements of ~~sections 1 and 2~~ **section 1.5(1) through 1.5(4)** of this chapter may take the examination provided by the board.

SECTION 48. IC 25-23.6-8-5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 5. The board shall issue a **marriage and family therapist license or marriage and family therapist associate license, as appropriate**, to an individual who:

(1) achieves a passing score, as determined by the board, on the examination provided under this chapter; and

(2) is otherwise qualified under this article.

SECTION 49. IC 25-23.6-8-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 8. (a) A **marriage and family therapist** license issued by the board is valid for the remainder of the renewal period in effect on the date the license was issued.

(b) An individual may renew a **marriage and family therapist** license by:

(1) paying a renewal fee on or before the expiration date of the license; and

(2) completing not less than fifteen (15) hours of continuing education each licensure year.

(c) If an individual fails to pay a renewal on or before the expiration date of a license, the license becomes invalid.

SECTION 50. IC 25-23.6-8-8.5 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: **Sec. 8.5. (a) A marriage and family therapist associate license issued by the board is valid for the remainder of the renewal period in effect on the date the license was issued.**

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(b) An individual may renew a marriage and family therapist associate license two (2) times by:

- (1) paying a renewal fee on or before the expiration date of the license; and
- (2) completing not less than fifteen (15) hours of continuing education each licensure year.

(c) The board may renew a marriage and family therapist associate license for additional periods based on circumstances determined by the board.

(d) If an individual fails to pay a renewal fee on or before the expiration date of a license, the license becomes invalid.

SECTION 51. IC 25-23.6-8-9 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 9. (a) The board may reinstate an invalid **marriage and family therapist** license **issued under section 5 of this chapter** up to three (3) years after the expiration date of the license if the individual holding the invalid license meets the requirements under IC 25-1-8-6.

(b) If more than three (3) years have elapsed since the date a **marriage and family therapist** license expired, the individual holding the license may renew the license by satisfying the requirements for renewal established by the board and meeting the requirements under IC 25-1-8-6.

(c) The board may reinstate an invalid **marriage and family therapist** associate license issued under section 5 of this chapter up to one (1) year after the expiration date of the license if the individual holding the invalid license meets the requirements under IC 25-1-8-6.

SECTION 52. IC 25-23.6-8-11 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 11. (a) An individual who is licensed as a **marriage and family therapist** under this ~~article~~ **chapter** shall notify the board in writing when the individual retires from practice.

(b) Upon receipt of the notice, the board shall:

- (1) record the fact the individual is retired; and
- (2) release the individual from further payment of renewal fees and continuing education requirements.

SECTION 53. IC 25-23.6-8-13 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: Sec. 13. (a) An individual who applies for a **marriage and family therapist** license under **section 1 of this article chapter** may be exempted by the board from the examination requirement under this chapter if the individual:

- (1) complies with subsection (b); and

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(1) ~~(1)~~ (2) is licensed or certified to practice as a marriage and family therapist in another state or ~~(2)~~ has engaged in the practice of marriage and family therapy for at least three (3) of the previous five (5) years.

(b) An individual may be exempted under subsection (a) if the individual:

~~(3)~~ (1) has passed a licensing examination substantially equivalent to the licensing examination required under this article;

~~(4)~~ (2) has passed an examination pertaining to the marriage and family therapy laws and rules of this state; and

~~(5)~~ (3) has not committed any act or is not under investigation for any act that constitutes a violation of this article;

and is otherwise qualified under ~~sections~~ **section 1 and 2** of this chapter and pays an additional fee.

SECTION 54. IC 25-23.6-10.1 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]:

Chapter 10.1. Addiction Counselors; Unlawful Practices; Penalty

Sec. 1. An individual may not:

(1) profess to be a licensed addiction counselor or licensed clinical addiction counselor;

(2) use the title:

(A) "licensed addiction counselor";

(B) "licensed clinical addiction counselor";

(C) "clinical addiction counselor";

(D) "addiction counselor"; or

(E) "substance abuse counselor";

(3) use any other title containing the words "licensed addiction counselor" or "licensed clinical addiction counselor";

(4) use any other words, letters, abbreviations, or insignia indicating or implying that the individual is a licensed addiction counselor or licensed clinical addiction counselor; or

(5) practice as a licensed addiction counselor or clinical addiction counselor for compensation;

unless the individual is licensed under this article.

Sec. 2. (a) This article may not be construed to limit the addiction counselor or clinical addiction counselor services performed by a person who does not use a title specified in this

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article and who is one (1) of the following:

(1) A licensed or certified health care professional acting within the scope of the person's license or certificate.

(2) A student, an intern, or a trainee pursuing a course of study in medicine or psychology or a course of study to gain licensure under this article in an accredited eligible postsecondary educational institution or training institution accredited by the Council for Accreditation of Counseling and Related Educational Programs or a graduate accumulating experience required for licensure if:

(A) the services are performed under qualified supervision and constitute a part of the person's supervised course of study or other level of supervision; and

(B) the student or graduate uses a title that contains the term "intern", "student", or "trainee".

(3) Not a resident of Indiana if the person performed addiction counseling in Indiana for not more than five (5) days in any one (1) month or more than fifteen (15) days in any one (1) calendar year and the person is authorized to perform such services under the laws of the state or country in which the person resides.

(4) A rabbi, priest, Christian Science practitioner, minister, or other member of the clergy.

(5) An employee or a volunteer for an organization performing charitable, religious, or educational functions or providing pastoral counseling or other assistance.

(6) A person who provides school counseling.

(7) A governmental employee who remains in the same job classification or job family of that job classification.

(b) Nothing in this section prohibits a person referred to in subsection (a) from qualifying for licensure under this article.

Sec. 3. A person who is not licensed under this article may use the title "certified addiction counselor" if the person:

(1) provides or ensures provision of addiction counseling services in:

(A) a health facility licensed under IC 16-28;

(B) a hospital licensed under IC 16-21 or IC 12-25;

(C) a substance abuse facility certified by the division of mental health and addiction;

(D) a home health agency licensed under IC 16-27-1; or

(E) a community health center;

(2) does not profess to be:

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- (A) a licensed clinical addiction counselor; or
- (B) a licensed addiction counselor under this article; and
- (3) has met all of the requirements established by the certifying body that is recognized by the board, is approved by the department of mental health and addiction, and is a NAADAC state affiliate.

Sec. 4. An individual who is licensed as an addiction counselor or clinical addiction counselor shall:

- (1) display the license or a clear copy of the license at each location where the addiction counselor or clinical addiction counselor regularly practices; and
- (2) include the words "licensed addiction counselor" or "licensed clinical addiction counselor" or the letters "LAC" or "LCAC" on all promotional materials, including business cards, brochures, stationery, advertisements, and signs that name the individual.

Sec. 5. An addiction counselor licensed under this article may provide factual testimony but may not provide expert testimony.

SECTION 55. IC 25-23.6-10.5 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]:

Chapter 10.5. Addiction Counselors; Certification; Examinations

Sec. 1. An individual who applies for a license as an addiction counselor must meet the following requirements:

- (1) Furnish satisfactory evidence to the board that the individual has:
 - (A) received a baccalaureate or higher degree in addiction counseling or in a related area as determined by the board from an eligible educational institution that meets the requirements under section 3(a)(1) of this chapter or from a foreign school that has a program of study that meets the requirements under section 3(a)(2) or 3(a)(3) of this chapter;
 - (B) completed the educational requirements under section 5 of this chapter; and
 - (C) completed two (2) years of experience in the practice of addiction counseling under the supervision of a licensed clinical addiction counselor, or an equivalent supervisor, as determined by the board, after receiving the degree in addiction counseling;
- (2) Furnish satisfactory evidence to the board that the

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individual does not have a conviction for a crime that has a direct bearing on the individual's ability to practice competently.

(3) Furnish satisfactory evidence to the board that the individual has not been the subject of a disciplinary action by a licensing or certification agency of another state or jurisdiction on the grounds that the individual was not able to practice as an addiction counselor without endangering the public.

(4) Pass an examination provided by the board.

(5) Pay the fee established by the board.

Sec. 2. An individual who applies for a license as a clinical addiction counselor must meet the following requirements:

(1) Furnish satisfactory evidence to the board that the individual has:

(A) received a master's or doctor's degree in addiction counseling or in a related area as determined by the board from an eligible postsecondary educational institution that meets the requirements under section 4(a)(1) of this chapter or from a foreign school that has a program of study that meets the requirements under section 4(a)(2) or 4(a)(3) of this chapter; and

(B) completed the educational requirements under section 6 of this chapter.

(2) Furnish satisfactory evidence to the board that the individual does not have a conviction for a crime that has a direct bearing on the individual's ability to practice competently.

(3) Furnish satisfactory evidence to the board that the individual has not been the subject of a disciplinary action by a licensing or certification agency of another state or jurisdiction on the grounds that the individual was not able to practice as a clinical addiction counselor without endangering the public.

(4) Pass an examination provided by the board.

(5) Pay the fee established by the board.

Sec. 3. (a) An applicant under section 1 of this chapter must have received a baccalaureate or higher degree in addiction counseling or in a related area as determined by the board from an eligible postsecondary educational institution that meets the following requirements:

(1) If the institution was located in the United States or a

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territory of the United States, at the time of the applicant's graduation the institution was accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation.

(2) If the institution was located in Canada, at the time of the applicant's graduation the institution was a member in good standing with the Association of Universities and Colleges of Canada.

(3) If the institution was located in a foreign country other than Canada, at the time of the applicant's graduation the institution:

(A) was recognized by the government of the country where the school was located as a program to train in the practice of addiction counseling; and

(B) maintained a standard of training substantially equivalent to the standards of institutions accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation.

(b) An applicant under section 1 of this chapter who has a degree from a program that did not emphasize addiction counseling may complete the course work requirement from an institution that is:

(1) accredited by the Council for Accreditation of Counseling and Related Educational Programs;

(2) recognized by NAADAC;

(3) recognized by the Council on Social Work Education; or

(4) recognized by the United States Department of Education.

Sec. 4. (a) An applicant under section 2 of this chapter must have received a master's or doctor's degree in addiction counseling, or in a related area as determined by the board, from an eligible postsecondary educational institution that meets the following requirements:

(1) If the institution was located in the United States or a territory of the United States, at the time of the applicant's graduation the institution was accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation.

(2) If the institution was located in Canada, at the time of the applicant's graduation the institution was a member in good standing with the Association of Universities and Colleges of Canada.

(3) If the institution was located in a foreign country other

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than Canada, at the time of the applicant's graduation the institution:

(A) was recognized by the government of the country where the school was located as a program to train in the practice of addiction counseling; and

(B) maintained a standard of training substantially equivalent to the standards of institutions accredited by a regional accrediting body recognized by the Commission on Recognition of Postsecondary Accreditation.

(b) An applicant under section 2 of this chapter who has a master's or doctor's degree from a program that did not emphasize addiction counseling may complete the course work requirement from an institution that is:

(1) accredited by the Council for Accreditation of Counseling and Related Educational Programs;

(2) recognized by NAADAC;

(3) recognized by the Council on Social Work Education; or

(4) recognized by the United States Department of Education.

Sec. 5. An applicant under section 1 of this chapter must complete the following educational requirements:

(1) Except as provided in section 3 of this chapter, complete forty (40) semester hours or sixty (60) quarter hours of course work from an eligible postsecondary educational institution that includes the following content areas:

(A) Addictions theory.

(B) Psychoactive drugs.

(C) Addictions counseling skills.

(D) Theories of personality.

(E) Developmental psychology.

(F) Abnormal psychology.

(G) Treatment planning.

(H) Cultural competency.

(I) Ethics and professional development.

(2) The content areas may be combined into any one (1) college level course, if the applicant can prove that the course work was devoted to each content area listed in subdivision (1).

(3) Complete at least one (1) supervised practicum, internship, or field experience in an addiction counseling setting that requires the applicant to provide a minimum of three hundred twenty (320) direct client contact hours of addiction counseling services under the supervision of a qualified

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supervisor approved by the board. The requirement under this subdivision may be met by a supervised practice experience that took place away from the institution of higher education but that is certified by an official of the eligible postsecondary educational institution as being equivalent to an undergraduate level practicum or internship program at an institution accredited by an accrediting agency approved by:

- (A) the United States Department of Education Commission on Recognition of Postsecondary Education;
- (B) the Association of Universities and Colleges of Canada;
- (C) the Council on Social Work Education; or
- (D) the Council for Accreditation of Counseling and Related Educational Programs.

Sec. 6. An applicant under section 2 of this chapter must complete the following educational requirements:

(1) Except as provided in section 4(b) of this chapter, complete twenty-seven (27) semester hours or forty-one (41) quarter hours of graduate course work that must include graduate level course credits with material in at least the following content areas:

- (A) Addiction counseling theories and techniques.
- (B) Clinical problems.
- (C) Psychopharmacology.
- (D) Psychopathology.
- (E) Clinical appraisal and assessment.
- (F) Theory and practice of group addiction counseling.
- (G) Counseling addicted family systems.
- (H) Multicultural counseling.
- (I) Research methods in addictions.
- (J) Ethics.
- (K) Clinical supervision.

(2) The content areas may be combined into any one (1) graduate level course, if the applicant can prove that the course work was devoted to each content area.

(3) Complete not less than one (1) graduate level course of two (2) semester hours or three (3) quarter hours in the following areas:

- (A) Legal, ethical, and professional standards issues in the practice of addiction counseling or an equivalent course approved by the board.
- (B) Appraisal and assessment for individual or

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interpersonal disorder or dysfunction.

(4) Complete at least one (1) supervised clinical practicum, internship, or field experience in an addiction counseling setting that requires the applicant to provide five hundred (500) direct client contact hours of addiction counseling services under the supervision of a qualified supervisor approved by the board. The requirements under this subdivision may be met by a supervised practice experience that took place away from an institution of higher education but that is certified by an official of the eligible postsecondary educational institution as being equivalent to a graduate level practicum or internship program at an institution accredited by an accrediting agency approved by:

- (A) the United States Department of Education Commission on Recognition of Postsecondary Education;
- (B) the Association of Universities and Colleges of Canada;
- (C) the Council on Social Work Education; or
- (D) the Council for Accreditation of Counseling and Related Educational Programs.

Sec. 7. (a) An applicant under section 1 of this chapter must have:

(1) at least five (5) years of addiction counseling experience, which must include two hundred (200) hours of clinical supervision, one hundred (100) hours of which must be individual supervision and fifty (50) hours of which must be group supervision, under the supervision of a licensed clinical addiction counselor who has at least five (5) years of experience or an equivalent supervisor, as determined by the board; or

(2) a valid and current level II certification from a certifying body that is:

- (A) a NAADAC state affiliate; and
- (B) approved by the department of mental health and addiction.

(b) A doctoral internship may be applied toward the supervised work experience requirement.

(c) Except as provided in subsection (d), the experience requirement may be met by work performed at or away from the premises of the supervising licensed clinical addiction counselor.

(d) The work requirement may not be performed away from the licensed clinical addiction counselor's premises if:

- (1) the work is the independent private practice of addiction

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counseling; and

(2) the work is not performed at a place that has the supervision of a licensed clinical addiction counselor or an equivalent supervisor, as determined by the board.

Sec. 8. (a) An applicant under section 2 of this chapter must have:

(1) at least five (5) years of clinical addiction counseling experience, which must include two hundred (200) hours of clinical supervision, one hundred (100) hours of which must be individual supervision and one hundred (100) hours of which must be group supervision, under the supervision of a licensed clinical addiction counselor who has at least five (5) years of experience or an equivalent supervisor, as determined by the board; or

(2) a valid and current certification as a:

(A) master addiction counselor issued by NAADAC or the National Board for Certified Counselors; or

(B) Level II certification from a certifying body that is a NAADAC state affiliate and is approved by the department of mental health and addiction.

(b) A doctoral internship may be applied toward the supervised work experience requirement.

(c) Except as provided in subsection (d), the experience requirement may be met by work performed at or away from the premises of the supervising licensed clinical addiction counselor.

(d) The work requirement may not be performed away from the licensed clinical addiction counselor's premises if:

(1) the work is the independent private practice of addiction counseling; and

(2) the work is not performed at a place that has the supervision of a licensed clinical addiction counselor or an equivalent supervisor, as determined by the board.

Sec. 9. An individual who satisfies the requirements of section 6 or 7 of this chapter may take the examination provided by the board.

Sec. 10. (a) The board may issue a temporary permit to allow an individual to profess to be a licensed addiction counselor or licensed clinical addiction counselor if the individual pays a fee established by the board and the individual:

(1) has a valid license or certificate to practice from another state and the individual has applied for a license from the board;

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(2) is practicing in a state that does not license addiction counselors, but is certified by a national association approved by the board and the individual has applied for a license from the board; or

(3) has been approved by the board to take the examination and has graduated from a school or program approved by the board and the individual has completed any experience requirement.

(b) A temporary permit issued under this section expires the earliest of:

(1) the date the individual holding the permit is issued a license under this article;

(2) the date the board disapproves the individual's license application; or

(3) one hundred eighty (180) days after the initial permit is issued.

(c) The board may renew a temporary permit if the individual holding the permit is scheduled to take the next examination and the individual:

(1) does not take the examination; and

(2) shows good cause for not taking the examination.

(d) A permit renewed under subsection (c) expires on the date the individual holding the permit receives the results from the next examination given after the permit was issued.

Sec. 11. (a) An individual who applies for a license under this article may be exempted by the board from the examination requirement under this chapter if the individual:

(1) complies with subsection (b); and

(2) is licensed as an addiction counselor in another state or has passed a licensing examination substantially equivalent to the licensing examination required under this article.

(b) An individual may be exempted under subsection (a) if the individual:

(1) has passed an examination pertaining to the addiction counseling laws and rules of Indiana; and

(2) has not committed any act, or is not under investigation for any act, that constitutes a violation of this article;

and is otherwise qualified under section 1 or 2 of this chapter and pays an additional fee established by the board.

SECTION 56. IC 34-30-2-99.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2008]: **Sec. 99.5. IC 25-23.3-9-1 (Concerning**

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1 acts and omissions under the Interstate nurse licensure compact).

2 SECTION 57. THE FOLLOWING ARE REPEALED [EFFECTIVE
3 JULY 1, 2008]: IC 25-23-1-28; IC 34-30-2-98.2.

4 SECTION 58. [EFFECTIVE JULY 1, 2008] (a) Notwithstanding
5 IC 25-23.3, as added by this act, IC 25-23.3 may not be
6 implemented until July 1, 2009.

7 (b) The Indiana state board of nursing shall, not later than June
8 30, 2009, adopt rules under IC 4-22-2 to administer IC 25-23.3, as
9 added by this act.

10 (c) This SECTION expires July 1, 2009.

11 SECTION 59. [EFFECTIVE JULY 1, 2008] (a) The definitions
12 under IC 25-23.6-1, as amended by this act, apply throughout this
13 SECTION.

14 (b) Notwithstanding IC 25-23.6, as amended by this act, before
15 July 1, 2009, an individual may engage in the practice of addiction
16 counseling and clinical addiction counseling, including the use of
17 any other words, letters, abbreviations, or insignia indicating or
18 implying that the individual is an addiction counselor or clinical
19 addiction counselor, without a license issued under IC 25-23.6, as
20 amended by this act.

21 (c) Notwithstanding IC 25-23.6-2-2(7), as amended by this act,
22 before July 1, 2009, a licensed clinical addiction counselor member
23 of the board is not required to be licensed under IC 25-23.6.

24 (d) The board shall exempt an individual from the requirements
25 under IC 25-23.6, as amended by this act, and grant the individual
26 a clinical addiction counselor license if the individual meets the
27 following requirements:

28 (1) Holds, before July 2, 2008, a master's or doctor's degree in
29 a human service or behavioral science discipline from an
30 eligible postsecondary educational institution.

31 (2) Holds a valid certification at the highest level offered by
32 the American Society of Addiction Medicine, the National
33 Board for Certified Counselors, NAADAC, or a NAADAC
34 state affiliate.

35 (3) Files an initial application to the board before January 1,
36 2009.

37 (e) The board shall exempt an individual from the requirements
38 under IC 25-23.6, as amended by this act, and grant the individual
39 an addiction counselor license if the individual meets the following
40 requirements:

41 (1) Holds, before July 2, 2008, a baccalaureate degree in a
42 human service or behavioral science discipline from an

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1 eligible postsecondary educational institution.

2 (2) Holds a valid certification at the highest level offered by a
3 NAADAC state affiliate.

4 (3) Files an initial application to the board before January 1,
5 2009.

6 An individual granted a license under this subsection may maintain
7 the independent scope of practice to which the individual was
8 entitled before July 1, 2008.

9 (f) The board shall exempt an individual from the requirements
10 under IC 25-23.6, as amended by this act, and grant the individual
11 an addiction counselor license if the individual meets the following
12 requirements:

13 (1) Holds, before July 2, 2008, an associate degree in a human
14 service or behavioral science discipline from an eligible
15 postsecondary educational institution.

16 (2) Holds a valid level II certification from a certifying body
17 approved by the department of mental health and addiction.

18 (3) Has at least ten (10) years of addiction related
19 employment.

20 (4) Files an initial application to the board before January 1,
21 2009.

22 However, an individual who is granted an addiction counselor
23 license under this subsection must obtain a baccalaureate or higher
24 degree in a human service or behavioral science discipline from an
25 eligible postsecondary educational institution before July 2, 2012.

26 (g) The board shall exempt an individual from the requirements
27 under IC 25-23.6, as amended by this act, and grant the individual
28 an addiction counselor license if the individual meets the following
29 requirements:

30 (1) Does not hold a degree in a human service or behavioral
31 science discipline from an eligible postsecondary educational
32 institution.

33 (2) Holds a valid level II certification from a certifying body
34 approved by the department of mental health and addiction.

35 (3) Has at least fifteen (15) years of addiction related
36 employment.

37 (4) Files an initial application to the board before January 1,
38 2009.

39 However, an individual who is granted an addiction counselor
40 license under this subsection must obtain a baccalaureate or higher
41 degree in a human service or behavioral science discipline from an
42 eligible postsecondary educational institution before July 2, 2014.

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1 (h) The governor shall appoint the following two (2) members
2 of the board under IC 25-23.6-2-2(7), as amended by this act, to
3 terms beginning July 1, 2008, as follows:

4 (1) One (1) licensed clinical addiction counselor to a term of
5 one (1) year.

6 (2) One (1) licensed clinical addiction counselor to a term of
7 two (2) years.

8 (i) This SECTION expires July 2, 2014.

9 SECTION 60. An emergency is declared for this act.

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